103D CONGRESS 1ST SESSION

## S. 1658

To establish safe harbors from the application of the antitrust laws for certain activities of providers of health care services, and for other purposes.

#### IN THE SENATE OF THE UNITED STATES

NOVEMBER 10 (legislative day, NOVEMBER 2), 1993

Mr. HATCH (for himself and Mr. Thurmond) introduced the following bill; which was read twice and referred to the Committee on the Judiciary

### A BILL

- To establish safe harbors from the application of the antitrust laws for certain activities of providers of health care services, and for other purposes.
  - 1 Be it enacted by the Senate and House of Representa-
  - 2 tives of the United States of America in Congress assembled,
  - 3 SECTION 1. SHORT TITLE.
  - 4 This Act may be cited as the "Health Care Antitrust
  - 5 Improvements Act of 1993".

1	SEC. 2. EXEMPTION FROM ANTITRUST LAWS FOR CERTAIN
2	COMPETITIVE AND COLLABORATIVE ACTIVI
3	TIES.
4	(a) Exemption Described.—An activity relating to
5	the provision of health care services shall be exempt from
6	the antitrust laws if—
7	(1) the activity is within one of the categories
8	of safe harbors described in section 3;
9	(2) the activity is within an additional safe har-
10	bor designated by the Attorney General under sec-
11	tion 4; or
12	(3) the activity is specified in and in compliance
13	with the terms of a certificate of review issued by
14	the Attorney General under section 5 and the activ-
15	ity occurs—
16	(A) while the certificate is in effect, or
17	(B) in the case of a certificate issued dur-
8	ing the 2-year period beginning on the date of
9	the enactment of this Act, at any time on or
20	after the first day of the 2-year period that
21	ends on the date the certificate takes effect.
2	(b) AWARD OF ATTORNEY'S FEES AND COSTS OF
3	Suit.—
4	(1) In General.—If any person brings an ac-
5	tion alleging a claim under the antitrust laws and
6	the activity on which the claim is based is found be-

- the court to be exempt from such laws under subsection (a), the court shall, at the conclusion of the action—
- (A) award to a substantially prevailing claimant the cost of suit attributable to such claim, including a reasonable attorney's fee, or
  - (B) award to a substantially prevailing party defending against such claim the cost of such suit attributable to such claim, including reasonable attorney's fee, if the claim, or the claimant's conduct during litigation of the claim, was frivolous, unreasonable, without foundation, or in bad faith.
  - (2) Offset in cases of bad faith.—The court may reduce an award made pursuant to paragraph (1) in whole or in part by an award in favor of another party for any part of the cost of suit (including a reasonable attorney's fee) attributable to conduct during the litigation by any prevailing party that the court finds to be frivolous, unreasonable, without foundation, or in bad faith.

#### 22 SEC. 3. SAFE HARBORS.

The following activities are safe harbors for purposes of section 2(a)(1):

1	(1) Combinations with market share
2	BELOW THRESHOLD.—Activities relating to health
3	care services of any combination of health care pro-
4	viders if the number of each type or specialty of pro-
5	vider in question does not exceed 20 percent of the
6	total number of such type or specialty of provider in
7	the relevant market area.
8	(2) ACTIVITIES OF MEDICAL SELF-REGULATORY
9	ENTITIES.—
0	(A) In general.—Subject to subpara-
1	graph (B), any activity of a medical self-regu-
12	latory entity relating to standard setting or
13	standard enforcement activities that are de-
14	signed to promote the quality of health care
15	provided to patients.
16	(B) Exception.—No activity of a medical
17	self-regulatory entity may be deemed to fall
18	under the safe harbor established under this
19	paragraph if the activity is conducted for pur-
20	poses of financial gain.
21	(3) Participation in surveys.—The partici-
22	pation of a provider of health care services in a writ-
23	ten survey of the prices of services, reimbursement
24	levels, or the compensation and benefits of employ-

ees and personnel, but only if—

- 1 (A) the survey is conducted by a third 2 party, such as a purchaser of health care serv-3 ices, governmental entity, institution of higher 4 education, or trade association;
  - (B) the information provided by participants in the survey is based on prices charged, reimbursements received, or compensation and benefits paid prior to the third month preceding the month in which the information is provided; and
  - (C) if the results of the survey are disseminated, the results are aggregated in a manner that ensures that no recipient of the results may identify the prices charged, reimbursement received, or compensation and benefits paid by any particular provider.
  - (4) Joint ventures for high technology and costly equipment and services.—Any activity of a health care cooperative venture relating to the purchase, operation, or marketing of high technology or other expensive medical equipment, or the provision of high cost or complex services, but only if the number of participants in the venture does not exceed the lowest number needed to support the venture. Other providers may be included in the venture.

1	ture, but only if such other providers could not pur-
2	chase, operate, or market such equipment or provide
3	a competing service either alone or through the for-
4	mation of a competing venture.
5	(5) Hospital mergers.—Activities relating to
6	a merger of 2 hospitals if, during the 3-year period
7	preceding the merger, one of the hospitals had an
8	average of 150 or fewer operational beds and an av-
9	erage daily inpatient census of less than 50 percent
0	of such beds.
1	(6) Joint purchasing arrangements.—Any
2	joint purchasing arrangement among health care
3	providers if—
4	(A) the purchases under the arrangement
5	represent less than 35 percent of the total sales
6	of the product or service purchased in the rel-
7	evant market; and
8	(B) the cost of the products and services
9	purchased jointly accounts for less than 20 per-
0	cent of the total revenues from all products or
1	services sold by each participant in the joint
2	purchasing arrangement.
3	(7) Negotiations.—Activities consisting of
4	good faith negotiations to carry out any activity—
5	(A) described in this section,

1	(B) within an additional safe harbor des-
2	ignated by the Attorney General under section
3	4,
4	(C) that is the subject of an application for
5	a certificate of review under section 5, or
6	(D) that is deemed a submission of a noti-
7	fication under section 6(a)(2)(B),
8	without regard to whether such an activity is carried
9	out.
10	SEC. 4. DESIGNATION OF ADDITIONAL SAFE HARBORS.
11	(a) In General.—
12	(1) Solicitation of proposals.—Not later
13	than 30 days after the date of the enactment of this
14	Act, the Attorney General shall publish a notice in
15	the Federal Register soliciting proposals for addi-
16	tional safe harbors.
17	(2) REVIEW AND REPORT ON PROPOSED SAFE
18	HARBORS.—Not later than 180 days after the date
19	of the enactment of this Act, the Attorney General
20	(in consultation with the Secretary of Health and
21	Human Services and the Chair of the Federal Trade
22	Commission) shall—
23	(A) review the proposed safe harbors sub-
24	mitted under paragraph (1); and

1	(B) submit a report to Congress desc	ribing
2	the proposals to be included in the public	cation
3	of additional safe harbors described in	para-
4	graph (3) and the proposals that are not	to be
5	so included, together with explanations	there-
6	fore.	

- (3) Publication of additional safe harbors for purposes of section 2(a)(2) for providers of health care services.

  Not later than 180 days after the date of the enactment of this Act, the Attorney General (in consultation with the Secretary of Health and Human Services and the Chair of the Federal Trade Commission) shall publish in the Federal Register proposed additional safe harbors for purposes of section 2(a)(2) for providers of health care services.

  Not later than 180 days after publishing such proposed safe harbors in the Federal Register, the Attorney General shall issue final rules establishing such safe harbors.
- (b) CRITERIA FOR SAFE HARBORS.—In establishing
  safe harbors under subsection (a), the Attorney General
  shall take into account the following:
- (1) The extent to which a competitive or collaborative activity will accomplish any of the following:

1		(A) An increase in access to health care
2		services.
3		(B) The enhancement of the quality of
4		health care services.
5		(C) The establishment of cost efficiencies
6		that will be passed on to consumers, including
7		economies of scale and reduced transaction and
8		administrative costs.
9		(D) An increase in the ability of health
10		care facilities to provide services in medically
11		underserved areas or to medically underserved
12		populations.
13		(E) An improvement in the utilization of
14		health care resources or the reduction in the in-
15		efficient duplication of the use of such re-
16		sources.
17		(2) Whether the designation of an activity as a
18	safe	harbor under subsection (a) will result in the
19	follow	wing outcomes:
20		(A) Health plans and other health care in-
21		surers, consumers of health care services, and
22		health care providers will be better able to ne-
23		gotiate payment and service arrangements
		2 2 2 2

1	(B) Taking into consideration the charac-
2	teristics of the particular purchasers and pro-
3	viders involved, competition will not be unduly
4	restricted.
5	(C) Equally efficient and less restrictive al-
6	ternatives do not exist to meet the criteria de-
7	scribed in paragraph (1).
8	(D) The activity will not unreasonably
9	foreclose competition by denying competitors a
10	necessary element of competition.
11	SEC. 5. CERTIFICATES OF REVIEW.
12	(a) Establishment of Program.—In consultation
13	with the Secretary and the Chair, the Attorney General
14	shall (not later than 180 days after the date of the enact-
15	ment of this Act) issue certificates of review in accordance
16	with this section for providers of health care services and
17	advise and assist any person with respect to applying for
18	such a certificate of review.
19	(b) Procedures for Application for Certifi-
20	CATE.—
21	(1) FORM; CONTENT.—To apply for a certifi-
22	cate of review, a person shall submit to the Attorney
23	General a written application which—
24	(A) specifies the activities relating to the
25	provision of health care services which satisfy

- the criteria described in section 4(b) and which will be included in the certificate; and
  - (B) is in a form and contains any information, including information pertaining to the overall market in which the applicant operates, required by rule or regulation promulgated under section 8.
  - (2) Publication of notice in Federal Register.—Within 10 days after an application submitted under paragraph (1) is received by the Attorney General, the Attorney General shall publish in the Federal Register a notice that announces that an application for a certificate of review has been submitted, identifies each person submitting the application, and describes the conduct for which the application is submitted.
  - (3) ESTABLISHMENT OF PROCEDURES FOR IS-SUANCE OF CERTIFICATE.—In consultation with the Chair and the Secretary, the Attorney General shall establish procedures to be used in applying for and in determining whether to approve an application for a certificate of review under this title. Under such procedures the Attorney General shall approve an application if the Attorney General determines that the activities to be covered under the certificate will

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1	satisfy the criteria described in section 4(b) for addi-
2	tional safe harbors designated under such section
3	and that the benefits of the issuance of the certifi-
4	cate will outweigh any disadvantages that may result
5	from reduced competition.
6	(4) TIMING FOR DECISION ON APPLICATION.—
7	(A) IN GENERAL.—Within 90 days after
8	the Attorney General receives an application for
9	a certificate of review, the Attorney General
0	shall determine whether the applicant's health
1	care market activities are in accordance with
2	the procedures described in paragraph (3). If
3	the Attorney General, with the concurrence of
4	the Secretary, determines that such procedures
5	are met, the Attorney General shall issue to the
6	applicant a certificate of review. The certificate
7	of review shall specify—
8	(i) the health care market activities to
9	which the certificate applies,
20	(ii) the person to whom the certificate
21	of review is issued, and
22	(iii) any terms and conditions the At-
23	torney General or the Secretary deems nec-
4	essary to assure compliance with the appli-

1	cable	procedures	described	in	paragraph
2	(3).				

- (B) APPLICATIONS DEEMED APPROVED.—
  If the Attorney General does not reject an application before the expiration of the 90-day period beginning on the date the Attorney General receives the application, the Attorney General shall be deemed to have approved the application and to have issued a certificate of review relating to the applicant's health care market activities covered under the application.
- (5) EXPEDITED ACTION.—If the applicant indicates a special need for prompt disposition, the Attorney General and the Secretary may expedite action on the application, except that no certificate of review may be issued within 30 days of publication of notice in the Federal Register under subsection (b)(2).

#### (6) ACTIONS UPON DENIAL.—

(A) NOTIFICATION.—If the Attorney General denies in whole or in part an application for a certificate, the Attorney General shall notify the applicant of the Attorney General's determination and the reasons for it.

1	(B)	REQUEST	FOR	RECONSIDERATION.—

An applicant may, within 30 days of receipt of notification that the application has been denied in whole or in part, request the Attorney General to reconsider the determination. The Attorney General, with the concurrence of the Secretary, shall notify the applicant of the determination upon reconsideration within 30 days of receipt of the request.

(C) RETURN OF DOCUMENTS.—If the Attorney General denies an application for the issuance of a certificate of review and thereafter receives from the applicant a request for the return of documents submitted by the applicant in connection with the application for the certificate, the Attorney General and the Secretary shall return to the applicant, not later than 30 days after receipt of the request, the documents and all copies of the documents available to the Attorney General and the Secretary, except to the extent that the information has been made public under an exception to the rule against public disclosure described in subsection (g)(2)(B).

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1	(7) Fraudulent procurement.—A certifi-
2	cate of review shall be void ab initio with respect to
3	any health care market activities for which the cer-
4	tificate was procured by fraud.
5	(c) Amendment and Revocation of Certifi-
6	CATES.—
7	(1) Notification of Changes.—Any appli-
8	cant who receives a certificate of review—
9	(A) shall promptly report to the Attorney
10	General any change relevant to the matters
11	specified in the certificate; and
12	(B) may submit to the Attorney General
13	an application to amend the certificate to re-
14	flect the effect of the change on the conduct
15	specified in the certificate.
16	(2) AMENDMENT TO CERTIFICATE.—An appli-
17	cation for an amendment to a certificate of review
18	shall be treated as an application for the issuance of
19	a certificate. The effective date of an amendment
20	shall be the date on which the application for the
21	amendment is submitted to the Attorney General.
22	(3) Revocation.—
23	(A) GROUNDS FOR REVOCATION.—In ac-
24	cordance with this paragraph, the Attorney
25	General may revoke in whole or in part a cer-

1	- 7	tificate of review issued under this section. The
2		following shall be considered grounds for the
3		revocation of a certificate:
4		(i) After the expiration of the 2-year
5		period beginning on the date a person's
6		certificate is issued, the activities of the
7		person have not substantially accomplished
8		the purposes for the issuance of the certifi-
9		cate.
10		(ii) The person has failed to comply
11		with any of the terms or conditions im-
12		posed under the certificate by the Attorney
13		General or the Secretary under subsection
14		(b)(4).
15		(iii) The activities covered under the
16		certificate no longer satisfy the criteria set
17		forth in section 4(b).
18		(B) REQUEST FOR COMPLIANCE INFORMA-
19		TION.—If the Attorney General or Secretary
20		has reason to believe that any of the grounds
21		for revocation of a certificate of review de-
22		scribed in subparagraph (A) may apply to a
23		person holding the certificate, the Attorney
24		General shall request such information from

such person as the Attorney General or the Sec-

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retary deems necessary to resolve the matter of compliance. Failure to comply with such request shall be grounds for revocation of the certificate under this paragraph.

- (C) Procedures for revocation.—If the Attorney General or the Secretary determines that any of the grounds for revocation of a certificate of review described in subparagraph (A) apply to a person holding the certificate, or that such person has failed to comply with a request made under subparagraph (B), the Attorney General shall give written notice of the determination to such person. The notice shall include a statement of the circumstances underlying, and the reasons in support of, the determination. In the 60-day period beginning 30 days after the notice is given, the Attorney General shall revoke the certificate or modify it as the Attorney General or the Secretary deems necessary to cause the certificate to apply only to activities that meet the procedures for the issuance of certificates described in subsection (b)(2).
- (D) INVESTIGATION AUTHORITY.—For purposes of carrying out this paragraph, the

Attorney General may conduct investigations in the same manner as the Attorney General conducts investigations under section 3 of the Antitrust Civil Process Act, except that no civil investigative demand may be issued to a person to whom a certificate of review is issued if such person is the target of such investigation.

#### (d) REVIEW OF DETERMINATIONS.—

- (1) AVAILABILITY OF REVIEW FOR CERTAIN ACTIONS.—If the Attorney General denies, in whole or in part, an application for a certificate of review or for an amendment to a certificate, or revokes or modifies a certificate pursuant to paragraph (3), the applicant or certificate holder (as the case may be) may, within 30 days of the denial or revocation, bring an action in any appropriate district court of the United States to set aside the determination on the ground that such determination is erroneous based on the preponderance of the evidence.
- (2) NO OTHER REVIEW PERMITTED.—Except as provided in paragraph (1), no action by the Attorney General or the Secretary pursuant to this title shall be subject to judicial review.
- 24 (3) EFFECT OF REJECTED APPLICATION.—If 25 the Attorney General denies, in whole or in part, an

- application for a certificate of review or for an amendment to a certificate, or revokes or amends a certificate, neither the negative determination nor the statement of reasons therefore shall be admissible in evidence, in any administrative or judicial proceeding, concerning any claim under the antitrust laws.
- 9 General shall publish a notice in the Federal Register on 10 a timely basis of each decision made with respect to an 11 application for a certificate of review under this section 12 or the amendment or revocation of such a certificate, in 13 a manner that protects the confidentiality of any propri-
- 15 (f) Annual Reports.—Every person to whom a cer16 tificate of review is issued shall submit to the Attorney
  17 General an annual report, in such form and at such time
  18 as the Attorney General may require, that contains any
  19 necessary updates to the information required under sub20 section (b) and a description of the activities of the holder
  21 under the certificate during the preceding year.
- 22 (g) RESTRICTIONS ON DISCLOSURE OF INFORMA-23 TION.—
- 24 (1) WAIVER OF DISCLOSURE REQUIREMENTS
  25 UNDER ADMINISTRATIVE PROCEDURE ACT.—Infor-

1	mation submitted by any person in connection with
2	the issuance, amendment, or revocation of a certific
3	cate of review shall be exempt from disclosure under
4	section 552 of title 5, United States Code.
5	(2) RESTRICTIONS ON DISCLOSURE OF COM
6	MERCIAL OR FINANCIAL INFORMATION.—
7	(A) IN GENERAL.—Except as provided in
8	subparagraph (B), no officer or employee of the
9	United States shall disclose commercial or fi-
10	nancial information submitted in connection
11	with the issuance, amendment, or revocation of
12	a certificate of review if the information is priv-
13	ileged or confidential and if disclosure of the in-
14	formation would cause harm to the person who
15	submitted the information.
6	(B) EXCEPTIONS.—Subparagraph (A)
7	shall not apply with respect to information
8	disclosed—
9	(i) upon a request made by the Con-
20	gress or any committee of the Congress,
21	(ii) in a judicial or administrative pro-
2	ceeding, subject to appropriate protective
.3	orders,
4	(iii) with the consent of the person
5	who submitted the information,

1		(iv) in the course of making a deter-
2		mination with respect to the issuance
3		amendment, or revocation of a certificate
4		of review, if the Attorney General deems
5		disclosure of the information to be nec-
6		essary in connection with making the de-
7		termination,
8		(v) in accordance with any require-
9		ment imposed by a statute of the United
10		States, or
11		(vi) in accordance with any rule or
12		regulation promulgated under subsection
13		(i) permitting the disclosure of the infor-
14		mation to an agency of the United States
15		or of a State on the condition that the
16		agency will disclose the information only
17		under the circumstances specified in
18		clauses (i) through (v).
19	(3)	PROHIBITION AGAINST USE OF INFORMA-
20	TION TO	SUPPORT OR ANSWER CLAIMS UNDER ANTI-
21	TRUST L	AWS.—Any information disclosed in an ap-
22	plication	for a certificate of review under this section

shall only be admissible into evidence in a judicial or

24 administrative proceeding for the sole purpose of es-

1	tablishing that a person is entitled to the protection
2	provided by such a certificate.
3	SEC. 6. NOTIFICATIONS PROVIDING REDUCTION IN CER
4	TAIN PENALTIES UNDER ANTITRUST LAV
5	FOR HEALTH CARE COOPERATIVE VEN
6	TURES.
7	(a) Notifications Described.—
8	(1) Submission of notification by ven-
9	TURE.—Any party to a health care cooperative ven-
10	ture, acting on such venture's behalf, may, not later
11	than 90 days after entering into a written agreement
12	to form such venture or not later than 90 days after
13	the date of the enactment of this Act, whichever is
14	later, file with the Attorney General a written notifi-
15	cation disclosing—
16	(A) the identities of the parties to such
17	venture,
18	(B) the nature and objectives of such ven-
19	ture, and
20	(C) such additional information as the At-
21	torney General may require by regulation.
22	(2) ACTIVITIES DEEMED SUBMISSION OF NOTI-
23	FICATION.—The following health care cooperative
4	ventures shall be deemed to have filed a written noti-

1	fication with respect to the venture under paragraph
2	(1):
3	(A) SUBMISSION OF APPLICATION FOR
4	CERTIFICATE OF REVIEW.—Any health care co-
5	operative venture for which an application for a
6	certificate of review is filed with the Attorney
7	General under section 4.
8	(B) CERTAIN VENTURES.—Any health care
9	cooperative venture meeting the following re-
10	quirements:
11	(i) The venture consists of a network
12	of non-institutional providers not greater
13	than—
14	(I) in the case of a nonexclusive
15	network in which the participating
16	members are permitted to create or
17	join other competing networks, 50
18	percent of the providers of health care
19	services in the relevant geographic
20	area and 50 percent of the members
21	of the provider specialty group in the
22	relevant market; or
23	(II) in the case of an exclusive
24	network in which the participating
25	members are not permitted to create

1	or join other competing networks, 35
2	percent of the providers of health care
3	services in the relevant geographic
4	area and 35 percent of the members
5	of the provider specialty group in the
6	relevant market.
7	(ii) Each member of the venture as-
8	sumes substantial financial risk for the op-
9	eration of the venture through risk-sharing
10	arrangements, including (but not limited
11	to)—
12	(I) the acceptance of capitation
13	contracts;
14	(II) the acceptance of contracts
15	with fee withholding mechanisms re-
16	lating to the ability to meet estab-
17	lished goals for utilization review and
8	management; and
9	(III) the holding by members of
20	significant ownership or equity inter-
21	ests in the venture, where the capital
2	contributed by the members is used to
3	fund the operational costs of the ven-
4	ture such as administration, market-
5	ing, and computer-operated medical

1		information, if the venture develops
2		and operates comprehensive programs
3		for utilization management and qual-
4		ity assurance that include controls
5		over the use of institutional, special-
6		ized, and ancillary medical services.
7		(3) SUBMISSION OF ADDITIONAL INFORMA-
8	TIOI	v.—
9		(A) REQUEST OF ATTORNEY GENERAL.—
10		At any time after receiving a notification filed
11		under paragraph (1), the Attorney General may
12		require the submission of additional information
13		or documentary material relevant to the pro-
14		posed health care cooperative venture.
15		(B) PARTIES TO VENTURE.—Any party to
16		a health care cooperative venture may submit
17		such additional information on the venture's be-
18		half as may be appropriate to ensure that the
19		venture will receive the protections provided
20		under subsection (b).
21		(C) REQUIRED SUBMISSION OF INFORMA-
22		TION ON CHANGES TO VENTURE.—A health
23		care cooperative venture for which a notification

is in effect under this section shall submit infor-

mation on any change in the membership of the

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venture not later than 90 days after such change occurs.

#### (4) Publication of notification.—

- (A) Information made publicly available.—Not later than 30 days after receiving a notification with respect to a venture under paragraph (1), the Attorney General shall publish in the Federal Register a notice with respect to the venture that identifies the parties to the venture and generally describes the purpose and planned activity of the venture. Prior to its publication, the contents of the notice shall be made available to the parties to the venture.
- (B) RESTRICTION ON DISCLOSURE OF OTHER INFORMATION.—All information and documentary material submitted pursuant to this section and all information obtained by the Attorney General in the course of any investigation or case with respect to a potential violation of the antitrust laws by the health care cooperative venture (other than information and material described in subparagraph (A)) shall be exempt from disclosure under section 552 of title 5, United States Code, and shall not be made

1	publicly available by any agency of the United
2	States to which such section applies except in
3	a judicial proceeding in which such information
4	and material is subject to any protective order.

- (5) WITHDRAWAL OF NOTIFICATION.—Any person who files a notification pursuant to this section may withdraw such notification before a publication by the Attorney General pursuant to paragraph (4). Any person who is deemed to have filed a notification under paragraph (2)(A) shall be deemed to have withdrawn the notification if the certificate of review in question is revoked or withdrawn under section 5.
- (6) NO JUDICIAL REVIEW PERMITTED.—Any action taken or not taken by the Attorney General with respect to notifications filed pursuant to this subsection shall not be subject to judicial review.
- 17 (b) Protections for Ventures Subject to No-18 tification.—

#### (1) IN GENERAL.—

(A) PROTECTIONS DESCRIBED.—The provisions of paragraphs (2), (3), (4), and (5) shall apply with respect to any action under the antitrust laws challenging conduct within the scope of a notification which is in effect pursuant to subsection (a)(1).

1	(B) TIMING OF PROTECTIONS.—The pro-
2	tections described in this subsection shall apply
3	to the venture that is the subject of a notifical
4	tion under subsection (a)(1) as of the earlie
5	of—
6	(i) the date of the publication in the
7	Federal Register of the notice published
8	with respect to the notification; or
9	(ii) if such notice is not published dur-
10	ing the period required under subsection
11	(a)(4), the expiration of the 30-day period
12	that begins on the date the Attorney Gen-
13	eral receives any necessary information re-
14	quired to be submitted under subsection
15	(a)(1) or any additional information re-
16	quired by the Attorney General under sub-
17	section $(a)(3)(A)$ .
18	(2) APPLICABILITY OF RULE OF REASON
19	STANDARD.—In any action under the antitrust laws,
20	the conduct of any person which is within the scope
21	of a notification filed under subsection (a) shall not
22	be deemed illegal per se, but shall be judged on the
23	basis of its reasonableness, taking into account all
24	relevant factors affecting competition, including, but

- not limited to, effects on competition in relevant 2 markets.
- (3) LIMITATION ON RECOVERY TO ACTUAL 4 DAMAGES AND INTEREST.—Notwithstanding section 5 4 of the Clayton Act, any person who is entitled to 6 recovery under the antitrust laws for conduct that is within the scope of a notification filed under subsection (a) shall recover the actual damages sus-8 9 tained by such person and interest calculated at the 10 rate specified in section 1961 of title 28, United States Code, for the period beginning on the earliest 12 date for which injury can be established and ending 13 on the date of judgment, unless the court finds that 14 the award of all or part of such interest is unjust 15 under the circumstances.
  - (4) AWARD OF ATTORNEY'S FEES AND COSTS OF SUIT.
    - (A) IN GENERAL.—In any action under the antitrust laws brought against a health care cooperative venture for conduct that is within the scope of a notification filed under subsection (a), the court shall, at the conclusion of the action—
      - (i) award to a substantially prevailing claimant the cost of suit attributable to

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1	such claim, including a reasonable attor
2	ney's fee, or
3	(ii) award to a substantially prevailing
4	party defending against such claim the
5	cost of such suit attributable to such claim
6	including reasonable attorney's fee, if the
7	claim, or the claimant's conduct during
8	litigation of the claim, was frivolous, un-
9	reasonable, without foundation, or in back
10	faith.
11	(B) Offset in cases of bad faith.—
12	The court may reduce an award made pursuant
13	to subparagraph (A) in whole or in part by an
14	award in favor of another party for any part of
15	the cost of suit (including a reasonable attor-
16	ney's fee) attributable to conduct during the
17	litigation by any prevailing party that the court
18	finds to be frivolous, unreasonable, without
19	foundation, or in bad faith.
20	(5) RESTRICTIONS ON ADMISSIBILITY OF IN-
21	FORMATION.—
22	(A) In General.—Any information dis-
23	closed in a notification submitted under sub-
24	section (a)(1) and the fact of the publication of
25	a notification by the Attorney General under

subsection (a)(4) shall only be admissible into
evidence in a judicial or administrative proceeding for the sole purpose of establishing that a
party to a health care cooperative venture is entitled to the protections described in this subsection.

(B) ACTIONS OF ATTORNEY GENERAL.—
No action taken by the Attorney General pursuant to this section shall be admissible into evidence in any judicial or administrative proceeding for the purpose of supporting or answering any claim under the antitrust laws.

# 13 SEC. 7. REVIEW AND REPORTS ON SAFE HARBORS AND CERTIFICATES OF REVIEW.

- 15 (a) IN GENERAL.—The Attorney General (in con16 sultation with the Secretary and the Chair) shall periodi17 cally review the safe harbors described in section 3, the
  18 additional safe harbors designated under section 4, and
  19 the certificates of review issued under section 5, and—
  - (1) with respect to the safe harbors described in section 3, submit such recommendations to Congress as the Attorney General considers appropriate for modifications of such safe harbors;
- 24 (2) with respect to the additional safe harbors 25 designated under section 4, issue proposed revisions

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1	to	such	activities	and	publish	the	revisions	in	the
2	Fe	deral	Register: a	and					

- 3 (3) with respect to the certificates of review,
  4 submit a report to Congress on the issuance of such
  5 certificates, and shall include in the report a descrip6 tion of the effect of such certificates on increasing
  7 access to high quality health care services at reduced
  8 costs.
- 9 (b) RECOMMENDATIONS FOR LEGISLATION.—The
  10 Attorney General shall include in the reports submitted
  11 under subsection (a)(3) any recommendations of the At12 torney General for legislation to improve the program for
  13 the issuance of certificates of review established under this
  14 title.

#### 15 SEC. 8. RULES, REGULATIONS, AND GUIDELINES.

- 16 (a) SAFE HARBORS, CERTIFICATES, AND NOTIFICA17 TIONS.—The Attorney General, with the concurrence of
  18 the Secretary, shall promulgate such rules, regulations,
  19 and guidelines as are necessary to carry out sections 3,
  20 4, 5, and 6, including guidelines defining or relating to
  21 relevant geographic and product markets for health care
  22 services and providers of health care services.
- (b) GUIDANCE FOR PROVIDERS.—
- 24 (1) IN GENERAL.—To promote greater cer-25 tainty regarding the application of the antitrust laws

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- to activities in the health care market, the Attorney General, in consultation with the Secretary and the 3 Chair, shall (not later than 1 year after the date of 4 the enactment of this Act), taking into account the 5 criteria used to designate additional safe harbors 6 under section 4 and grant certificates of review 7 under section 5, publish guidelines—
  - (A) to assist providers of health care services in analyzing whether the activities of such providers may be subject to a safe harbor under sections 3 or 4; and
  - (B) describing specific types of activities which would meet the requirements for a certificate of review under section 5, and summarizing the factual and legal bases on which the activities would meet the requirements.
  - (2) PERIODIC UPDATE.—The Attorney General shall periodically update the guidelines published under paragraph (1) as the Attorney General considers appropriate.
  - (3) WAIVER OF ADMINISTRATIVE PROCEDURE ACT.—Section 553 of title 5, United States Code, shall not apply to the issuance of guidelines under paragraph (1).

1	SEC. 9. ESTABLISHMENT OF HHS OFFICE OF HEALTH CARE
2	COMPETITION POLICY.
3	(a) In General.—There is established within the
4	Department of Health and Human Services an Office to
5	be known as the Office of Health Care Competition Policy
6	(hereafter in this section referred to as the "Office"). The
7	Office shall be headed by a director, who shall be ap-
8	pointed by the Secretary.
9	(b) Duties.—The Office shall coordinate the respon-
10	sibilities of the Secretary under this Act and otherwise as-
11	sist the Secretary in developing policies relating to the
12	competitive and collaborative activities of providers of
13	health care services.
14	SEC. 10. DEFINITIONS.
15	In this Act, the following definitions shall apply:
16	(1) The term "antitrust laws"—
17	(A) has the meaning given it in subsection
18	(a) of the first section of the Clayton Act (15
19	U.S.C. 12(a)), except that such term includes
20	section 5 of the Federal Trade Commission Act
21	(15 U.S.C. 45) to the extent such section ap-
22	plies to unfair methods of competition; and
23	(B) includes any State law similar to the
24	laws referred to in subparagraph (A).
25	(2) The term "Chair" means the Chair of the

- 1 (3) The term "health benefit plan" means any
  2 hospital or medical expense incurred policy or certifi3 cate, hospital or medical service plan contract, or
  4 health maintenance subscriber contract, or a mul5 tiple employer welfare arrangement or employee ben6 efit plan (as defined under the Employee Retirement
  7 Income Security Act of 1974) which provides bene8 fits with respect to health care services.
  - (4) The term "health care cooperative venture" means any activities, including attempts to enter into or perform a contract or agreement, carried out by 2 or more persons for the purpose of providing health care services.
  - (5) The term "health care services" means any services for which payment may be made under a health benefit plan, including services related to the delivery or administration of such services.
  - (6) The term "medical self-regulatory entity" means a medical society or association, a specialty board, a recognized accrediting agency, or a hospital medical staff, and includes the members, officers, employees, consultants, and volunteers or committees of such an entity.
  - (7) The term "person" includes a State or unit of local government.

1	(8) The term "provider of health care services"
2	means any individual or entity that is engaged in the
3	delivery of health care services in a State and that
4	is required by State law or regulation to be licensed
5	or certified by the State to engage in the delivery of
6	such services in the State.
7	(9) The term "Secretary" means the Secretary
8	of Health and Human Services.
9	(10) The term "specialty group" means a medi-
10	cal specialty or subspecialty in which a provider of
11	health care services may be licensed to practice by
12	a State (as determined by the Secretary in consulta-
13	tion with the certification boards for such specialties
14	and subspecialties).
15	(11) The term "standard setting and enforce-
16	ment activities" means—
17	(A) accreditation of health care practition-
18	ers, health care providers, medical education in-
19	stitutions, or medical education programs,
20	(B) technology assessment and risk man-
21	agement activities,
22	(C) the development and implementation of
23	practice guidelines or practice parameters, or
24	(D) official peer review proceedings under-
25	taken by a hospital medical staff (or committee

thereof) or a medical society or association for purposes of evaluating the professional conduct or quality of health care provided by a medical professional.

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